



Premature Weaning and Lived Experience of Primiparae Women during Breastfeeding

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Abstract

This qualitative analysis has searched the primiparae women's experiences around the practice of breastfeeding after weaning their children under the age of six months. After their free and deliberate consent, 17 mothers, met at the maternal and child health service of the Sendwe's Hospital of Lubumbashi in D.R. Congo, constituted the population of our analysis. The semi-directive interview allowed us to collect data. Primiparae women have encountered negative experiences during breastfeeding stage. This has definitely influenced them to stop breastfeeding of their children at six months. The analysis has found that these mothers were not supported nor adequately informed or prepared at the process of giving birth. In the practice of breastfeeding, the subjective perception of their health state and sensations perceived have involved them to stop breastfeeding. This seems more superficial and unsubstantial reasons; however, they have led to stopping breastfeeding.

Subject Areas

Public Health

Keywords

Weaning, Experience, Primiparae, Breastfeeding

1. Introduction

The psychological state of the mother at the time of breastfeeding influences her evolution. The African culture promotes breastfeeding and for a long time possible. However, the realities of our community show that despite many benefits of

breast milk, breastfeeding issues in the first months lead to the weaning of babies prior to six months. Yet, it is never an initial desire of the mother. The case becomes more worrying for primiparae mothers. The latter have been the subject of several studies which show that many women practice breastfeeding [1] where they breastfeed children most and for longer [2].

Besides the fact of returning to work for women practicing breastfeeding, the self-image and the perception of difficulties related to breastfeeding remain factors which lead to the stopping of maternal breastfeeding. The experience and the real-life of breastfeeding are to be analyzed in deep especially for primiparae women, who in principle encounter enormous difficulties, especially if they have not received any preparation and support sessions for maternal breastfeeding.

This study analyzes the real-life of primiparae women during the first six months of breastfeeding in order to better understand and explain the reasons of stopping maternal breastfeeding.

2. Method

The qualitative research has been initiated. The semi-directive interview was used to explore mothers' experiences during breastfeeding. This interview used open-ended questions consisting of stimulus themes to revive the central issue of lived experience during breastfeeding practice. The main question was: "*Would you like to tell us about the experience you had while breastfeeding your baby until weaning?*" We have also planned following recovery themes:

- How do you feel during the period of breastfeeding?
- What was the right moment for breastfeeding and the reasons for choosing this breastfeeding moment?
- What was your perception of your state of health during breastfeeding?
- Did you observe any abnormal signs or sensations on your health on that period of breastfeeding?
- What exactly can you remember as difficulties that actually having actually led to weaning?
- Tell us about the strategies you used to successfully breastfeed despite some encountered difficulties?

The agreement and the consent were obtained. In an exhaustive manner, we selected 17 women and mothers who stopped breastfeeding before six months. This sample size represents all primiparae among all breastfeeding mothers who consulted during the period of our study. Attendance was low and rare still primiparae among those who consulted. The Sendwe's Hospital of Lubumbashi served as a research framework for women and mothers who came to the maternal and child health service (including antenatal care, infant weighing and family planning) during the period comprised from March to June 2017. We chose the appointment days at the preschool consultation for children under one year old. After selecting survey participants, we retired for 30 minutes of interview in a chosen frame.

3. Results

In the following lines, we present the basic demographic data of the primiparae surveyed. The mean age of the primiparae surveyed was 26 years. They were housewives (n = 13), students (n = 2), workers (n = 2) and married (n = 17). About the level of education, they had secondary level (n = 11), primary level (n = 5) and university (n = 1). All mothers lived in Lubumbashi city; mainly of the following communes: Annexe (n = 7), Lubumbashi (n = 5), Ruashi (n = 3) and Kenya (n = 2).

3.1. Breastfeeding Lived Experience

Breastfeeding was negatively experienced for some mothers (n = 13) and positively for others (n = 4). Other research has supported our findings. For them, breastfeeding is experienced as a constraint, depriving mothers of certain freedoms and altering their daily and social lives [3] [4]. Contrary to the results obtained by Bayard [5], breast milk and breastfeeding are represented positively and mainly described as advantageous. We believe that this last result is more about mothers who have successfully breastfed their children.

The pleasure of breastfeeding was mentioned and felt by a small number of mothers (n = 5). The mother's intake of food and satiety increases the pleasure of breastfeeding. As one breastfeeding mother declared, "I feel more pleasure in breastfeeding my babies, if I have already eaten and my stomach is full of food". This idea was also mentioned by other women respondents (n = 9). These factors that seem to support breastfeeding are inconsistent. They leave more tracks leading to weaning.

3.2. Favorable Moment for Breastfeeding

At the time preparing to giving birth, the pregnant woman is also prepared for breastfeeding the infant. Support will be provided at any time, even at the maternity ward and postpartum. The duration of breastfeeding is variable. The entire period of breastfeeding is felt to be favorable for breastfeeding (thus providing pleasure to continue breastfeeding). The psycho-emotional bond further reinforces breastfeeding. In particular, the perceived favorable moment for breastfeeding depends on one mother to another, circumstances and activities performed by mothers.

In this analysis, respondents felt pleasure in breastfeeding their child; for some, especially when they come back home after a long moment of separation and while the breast milk is already flowing (n = 5); for others, especially when the child has more appetite for suckling (n = 8); for some others, when they have no other occupations (n = 3) and when the child's father is at home (to avoid pressure or as a sign of pleasure shown to the husband while the latter is at home) (n = 1). If for Walburg and Conquet [1], there is little data concerning the favorable moment of breastfeeding and the reasons for the choice of these moments. However, in our study, we tried to identify these reasons for choosing

these moments.

3.3. Sensations and Perception of the Mother's State during Breastfeeding Period

Breastfeeding mothers also decided to wean their babies due to their health state (perceived or felt by signs). During the period of breastfeeding, the respondents revealed that they were losing weight (loss of body weight subjectively judged by observation (n = 4)—as one mother stated, “*I lose weight when the baby suckles a lot*”—that they felt palpitations (n = 5)—“*... but if I'm hungry, I feel palpitations*”—, trauma to the nipples (n = 1), the presence of armpits rashes (n = 2)—“*I have pimples in my armpits*”—and the pain due to uterine contractions) (n = 2). Although for some women, this moment goes without any particularity at the health level (n = 6)—“*I did not experience anything particular during the breastfeeding period*”; however, they decide to stop breastfeeding before six months. Moreover, the positive aspects are also mentioned. According to the study conducted by Montigny & Goudreau and *et al.* [6], Breastfeeding is valued for its natural appearance: “*The woman has the task of breastfeeding because it is her natural task*” (n = 12) and “*It's better to breastfeed than to give artificial milk. The word artificial means that there is something unnatural*” (n = 2). Breastfeeding is perceived to be so natural that all respondents reported that their children's breastfeeding was safe.

3.4. Strategies for the Successful Breastfeeding Practice

To successfully breastfeeding, the respondents took several strategies. They justified the practice of breastfeeding during this short period before weaning. Our results showed that all women “*held the child in the chest and held the breast for him*” (n = 17). In addition, some “*fed themselves first prior to breastfeeding*” (n = 5); a woman “*put saliva on the nipple*” (n = 1). According to Grainer [7], if we want to convince women to increase the duration and intensity of breastfeeding, it is rational and defensible to do the “*Promotion*” of breastfeeding support mechanisms. As for us, we believe that information on practices that contribute to successful breastfeeding will always have to be passed on to new mothers, which was missing from these mothers interviewed. Yet Kramer and Kakuma [8] have noted this. For them, women need the support of society as a whole, and breastfeeding is accepted as a social norm, part of life, and as a normal extension of reproductive process following pregnancy.

3.5. Difficulties Encountered during Breastfeeding and Leading to Stopping

Breastfeeding became increasingly difficult for mothers with vertigo and feeling of exhaustion (n = 3), when the mother is hungry (n = 9) and if the child no appetite “*when the child does not suckle as usual*” (n = 5). There are very few studies focusing on the duration of breastfeeding. Nevertheless, according to Thirion [9], many women stop breastfeeding in the first weeks due to difficulties in

starting breastfeeding (including cracks, waterlogging, and breast milk insufficiency). As in Walburg and Conquet [1], primiparae women stopped breastfeeding after three months, mainly because of difficulties; while, after three months, most of the stops are the result of the return to work. In addition, other factors associated with premature weaning took into account the importance of maternal motivation in the success of breastfeeding, the taking into account of mothers' initial desire for its duration seems relevant [10]. By looking deeply into the issue regarding difficulties, it seems like breastfeeding difficulties are not seen by participants as problems, but rather as normal and inherent to breastfeeding [6]. As for what concerns our study, the difficulties identified are related to the lack of support, information and preparation for giving birth. Weaning occurs at the moment in unfavorable conditions endangering the health of the infant. Clearly, weaning before six months raises protein-energy malnutrition as a critical health issue in infants [11].

4. Conclusions

Primiparae women have had negative experiences during breastfeeding. This prompted them to practice weaning before six months. They have certainly not been supported or adequately informed or prepared at giving birth. In the practice of breastfeeding, the subjective perception of their state of health and perceived sensations facilitated the stop of breastfeeding. This seems more superficial and unsubstantial reasons; however, they have led to stopping breastfeeding. Our study thus revealed some basic ways for intervention of the women's education lessons received in the maternal and child health and maternity services.

Within its limits, the study must be deepened over a larger sample and include mothers regardless of parity. These results will complement those of quantitative studies on cessation of breastfeeding.

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